



**Application for:**

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Organization Name

**FY 2016  
City of Monroe  
Lodging Tax Funds**

**FINAL DATE FOR SUBMISSION:**  
Must be received by  
*Wednesday, September 18, 2015 - 4:00 PM*

**RETURN TO:**  
*Lodging Tax Advisory Committee  
C/O Pamela Baker  
City of Monroe  
806 W Main St  
Monroe, WA 98272*

**Lodging Tax Advisory Committee**  
**2015 Membership**

**Geoffrey Thomas, Mayor**  
**LTAC Committee Chair**

Kelcey Hendricks, Industry Group

Una Wirkebau-Hartt, Fund User

Bill Shin, Industry Group

Doug Hobbs, Fund User

**If you have any questions regarding the application, and/or funding  
process please contact Pamela Baker at  
360-863-4524 or [pamb@monroewa.gov](mailto:pamb@monroewa.gov)**

**Before submitting your application, be sure to:**

- ☐ Check math, spelling, and formatting.
- ☐ Make sure your application is signed on page 6 and page 13.
- ☐ Include all required financial information.

**When you submit your application, be sure to:**

- ☐ Submit one complete signed original application.
- ☐ Submit five copies of the signed application.

## **INFORMATION ON LODGING TAX FUNDS & WHO MAY APPLY**

### **What are “Lodging Tax Funds”?**

Lodging taxes are paid when people purchase lodging, such as renting a room at a hotel.

### **How can those funds be used?**

Washington State law (RCW 67.28.1815) requires that funds be expended “...solely for the purpose of paying all or part of the cost of tourism promotion, acquisition of tourism-related facilities, or operation of tourism-related facilities...”

Tourism promotion is defined as “... activities, operations, and expenditures designed to increase tourism, including but not limited to advertising, publicizing, or otherwise distributing information for the purpose of attracting and welcoming tourists; developing strategies to expand tourism; operating tourism promotion agencies; and funding the marketing of or the operation of special events and festivals designed to attract tourists.”

### **Who can apply for funds?**

Any person or organization that will use the funds for the purposes of promoting tourism in the Monroe Area with the goal of increasing the economic impact of tourism.

### **Who decides which applications get funded?**

All applications are reviewed by the Lodging Tax Advisory Committee (LTAC), which is charged with making recommendations for funding to the Monroe City Council, who make the final funding approval.

### **How do I apply?**

The Lodging Tax fund application is available on-line at [monroewa.gov/LTAC](http://monroewa.gov/LTAC) or may be picked up at Monroe City Hall, 806 W Main St, Monroe, WA 98272.

**Applications are due by 4:00 PM, on Wednesday, September 18, 2015, to:**

Lodging Tax Advisory Committee

c/o Pamela Baker  
City of Monroe  
806 W Main St  
Monroe WA 98272

### **What is the timeline for Lodging Tax funds?**

|                              |                                    |
|------------------------------|------------------------------------|
| August 14                    | Application available              |
| <b>September 18, 4:00 PM</b> | <b>Application due</b>             |
| October 20                   | LTAC final recommendations         |
| December 15                  | Lodging Tax Awards                 |
| January – February 2016      | Contracts issued for 2016 projects |

## Who can I talk to if I have questions?

If you have any questions about completing the application or about the LTAC program or funding process, please call Pamela Baker at 360-863-4524 or email at [pamb@monroewa.gov](mailto:pamb@monroewa.gov).

## **GENERAL CONDITIONS OF APPLICATION**

### **Applications will be screened as follows:**

- Late applications will not be accepted.
- Be sure to use the 2016 application form.
- Capital projects will not be funded.
- **Applications must be complete**, all applicable questions must be answered, and applicable information must be included.
- All answers to questions must be answered on the same page as the question.
- Do not re-format pages, although you may change spacing between paragraphs on the same page. Do not delete a question. The page total must not exceed ten (10), not including Required Financial Information, Standard Required Documents, and a maximum of three (3) letters of support.
- Do not attach any materials unless specifically requested.
- Do not include pages larger than 8½ by 11. Please leave a minimum of 1-inch margins for binding purposes.
- All required financial information must be **complete and must balance**.
- Applications must be signed by a person authorized to bind the agency to a contract.
- Applicants must submit one original application and five copies.

## 2016 Lodging Tax – Tourism Promotion Application

### 1. Project Information

**1a.** Project/Activity Name: \_\_\_\_\_

Amount requested: \$ \_\_\_\_\_  
(Amount requested must match Total Costs, column "a." on page 14)

Total Project Amount: \$ \_\_\_\_\_  
(Total Project Amount must match Total Costs, column "c." on page 14)

**1b.** Name of Applicant organization: \_\_\_\_\_

Mailing Address:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Tax ID Number: \_\_\_\_\_

Organization Unified Business Identifier (UBI): \_\_\_\_\_

UBI Expiration Date: \_\_\_\_\_

Type of Organization: \_\_\_\_\_  
(non-profit, for-profit, municipality, etc.)

**1c.** Contact Name: \_\_\_\_\_

Title: \_\_\_\_\_

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

Signature: \_\_\_\_\_

The signatory declares that he/she is an authorized official of the applicant organization, is authorized to make this application, is authorized to commit the organization in financial matters, and will assure that any funds received as a result of this application are used only for the purposes set forth herein, and verifies that all the information contained in this application is valid and true to the best of his/her knowledge.

## **2. Project Description**

Please provide a detailed description of the proposed project/activity. Include information on the area the project will serve, its expected impact, and list the responsible party(s). Describe how the project/activity will enhance tourism and/or result in a positive economic impact. If there is a charge or fee for this activity, please describe.

## **3. Beneficiaries**

Please list and provide specific information regarding all individuals, businesses, areas, or organizations that will directly benefit from the project/activity.

#### **4. Goals/Monitoring**

Describe the goals of the project/activity. Please provide estimates of how any monies received will result in increases in the number of people traveling for business or pleasure on a trip:

- A. Away from the place of residence or business and staying overnight in paid accommodations
  
  
  
  
  
  
  
  
  
  
- B. To a place fifty miles or more one way from their place of residence or business for the day or staying overnight
  
  
  
  
  
  
  
  
  
  
- C. From another country or state outside of their place of residence or their business

If so, how will this increase be tracked/monitored?

How will an increase in the sale of goods and services as a result of the project be measured?

What other short or long term economic benefits will occur and how will that be tracked?

Why do you believe those project/activity outcomes are feasible?

**Applicants are required to submit a post-funding report providing pertinent data evaluating tourism benefits resulting from the use of Lodging Tax funds as compared with the estimates contained in this application.**



**5. Funding Requirements.**

Due to funding constraints, partial funding may be recommended by the LTAC.

If partial funding is received, how will that impact the project/activity? Please describe:

**6. Use of Funds**

Provide detail on how the funds will be used. For example, \$20,000 of the funds will be used for marketing, \$5,000 for administration, \$10,000 for Consultants, etc.

## 7. Project Budget. Include in-kind contributions.

**Income:** A diversified funding base is important to the success of any project. Please list all other sources of funding for the project, both anticipated and confirmed and when that funding will be available to the project. Include your own funding, sponsorships, other grants, etc.

| <b>Funding Source</b><br>(list all revenue sources anticipated for 2016, not including requested Lodging Tax Funds) | <b>Amount</b> | <b>Confirmed?<br/>Yes/No</b> | <b>Date<br/>Available</b> |
|---|---------------|------------------------------|---------------------------|
|   | \$            |                              |                           |
|   | \$            |                              |                           |
|   | \$            |                              |                           |
|   | \$            |                              |                           |
|   | \$            |                              |                           |
|   | \$            |                              |                           |
|   | \$            |                              |                           |
|   | \$            |                              |                           |
|   | \$            |                              |                           |

**Expenses:** Based on full funding, please list project costs.

**PLEASE NOTE:** Certain expenses may not be reimbursable, at the sole discretion of the City of Monroe. You will only be repaid at the City of Monroe authorized rates. Insurance is not an eligible cost. If you have any questions about any of your proposed expenses, please discuss them with Brad Feilberg at 360-453-7229 bfeilberg@monroewa.gov.

|  | <b>a. Lodging Tax<br/>Funds</b> | <b>b. Other Funds<br/>Include in-<br/>kind dollars</b> | <b>c. Total</b> |
|--|---------------------------------|--|-----------------|
| <b>Personnel</b> (salaries & benefits)   | \$                              | \$   | \$              |
| <b>Administration</b> (rent, utilities, postage, supplies, janitorial services, minor equipment etc.)<br>Note: Insurance is not an eligible cost | \$                              | \$   | \$              |
| <b>Marketing/Sales</b><br>(Including trade shows, sales calls, related travel, etc.)   | \$                              | \$   | \$              |
| <b>Contract Services</b><br>(Contract personnel for accounting, marketing, web design, etc.)   | \$                              | \$   | \$              |
| <b>Other</b> (Describe below)  | \$                              | \$   | \$              |
|  |                                 |  |                 |
| <b>TOTAL COSTS</b> (Amount in column "a." must match "Amount Requested" and amount in column "c" must equal "Total Project Amount" on Page 10)   | \$                              | \$   | \$              |
| <b>Description for Other</b>   |                                 |  |                 |
|  |                                 |  |                 |

**8.** Indicate what efforts have been made to access funding from additional sources?

## **10. Coordination and Collaboration**

Please provide information about any other organizations or agencies involved in this project/activity. Describe their level of involvement. Describe how this project coordinates with other tourism promotion efforts or services in the area, including Chambers of Commerce, local festivals, and local lodging and restaurants. You may attach up to three letters of support from these organizations.

## 11. Certification

The applicant hereby certifies and confirms:

1. That it does not now nor will it during the performance of any contract resulting from this proposal unlawfully discriminate against any employee, applicant for employment, client, customer, or other person(s) on the basis of race, creed, color, religion, sex, age, national origin, marital status, sexual orientation, citizenship status, disability or veteran status.
2. That it will abide by all relevant local, state, and federal laws and regulations;
3. That it has read and understands the information contained in this application for funding and is in compliance with the provisions thereof, and;
4. That the individual signing below has the authority to certify to these provisions for the applicant organization, and declares that he/she is an authorized official of the applicant organization, is authorized to make this application, is authorized to commit the organization in financial matters, and will assure that any funds received as a result of this application are used for the purposes set forth herein.

**Primary Signature:** \_\_\_\_\_

\_\_\_\_\_  
Printed Name & Title of Chief Administrator/Authorizing Official

\_\_\_\_\_  
Date